

DEC 21 2007

Attorney Docket No: BU-096XX  
 Inventor(s): Caroline A. Genco et al.  
 Application No. 10/535,490  
 TC Art Unit: 1645/Examiner: Vanessa L. Ford  
 OA Date: 9/28/07/Resp. Date: 12/21/07

Rev 09/07

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Date: December 21, 2007

Via Facsimile

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Attorney

Docket No.: BU-096XX

Sir:

In re application of: Caroline A. Genco et al.

Entitled: IMMUNIZATION WITH PORPHYROMONAS GINGIVALIS PROTECTS AGAINST HEART DISEASE

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- ☐ This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$ ) per §1.17(e).  
☐ Enter the unentered amendment previously filed on per §1.116.

☒ Small Entity Status is asserted.☒ A Petition for Extension of Time for two (2) months is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$230.00) per §1.17.☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.☒ Other: Copy of Decision on Petition Under 37 CFR 1.10(d) dated September 12, 2006.

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	3 - 3	= 0	x \$210.00 =	0
Total	13 - 13	= 0	x \$ 50.00 =	0
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$370.00 =	0
SUBTOTAL ADDITIONAL FEE				0
Small Entity filing, divide by 2. Small Entity status must be asserted.				0
TOTAL ADDITIONAL FEE				0

☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$ ) for the cost of same.

☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Vanessa L. Ford, TC Art Unit 1645, Fax No. (571) 273 8300, on Dec. 21, 2007.

*Holliday C. Heine*  
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HCH/aft/360961.1